



# OFFICE *of* ADMINISTRATION

## AUTHORIZED SIGNATURES OFFICE OF ADMINISTRATION DIVISION OF BUDGET AND PLANNING

	LAST NAME	FIRST NAME, M	NOTES	STREET ADDRESS	CITY, STATE ZIP	EMAIL ADDRESS	OFFICE PHONE NO
SA	McQuary	Pamela		Capitol Building Room 124	Jefferson City, MO 65101	pamela.mcquary@oa.mo.gov	573-751-3925
SA	Strong-Goeke	Lori		Capitol Building Room 124	Jefferson City, MO 65101	lori.strong-goeke@oa.mo.gov	573-751-9328
AA	Luebbering	Linda	Director	Capitol Building Room 124	Jefferson City, MO 65101	linda.luebbering@oa.mo.gov	573-751-3925

\*SA = SIGNATURE AUTHORITY

AA = APPOINTING AUTHORITY

POC = POINT OF CONTACT